

Is your RETURN

6. Signature (Addressee or Agent)

PS Form **3811**, December 1994

102595-99-B-0223

Domestic Return Receipt

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

7. Date of Delivery

☐ Return Receipt for Merchandise

Certified Insured COD

Richard L. Sallquist SALLQUIST & DRUMMOND

4b. Service Type
☐ Registered

Thank you for using Return Receipt Service.

☐ Express Mail

2525 W. Washington Street

Phoenix, AZ 85016

RECEIVED

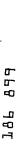
2000 SEP -5 A 11:35

AZ CORP COMPANISOR DECEMBER COMPANISOR

SENDER: | Complete items 1 and/or 2 for additional services. | Complete items 3, 4a, and 4b. | Print your name and address on the reverse of this form so that we can return this card to you. | Attach this form to the front of the mailpiece, or on the back if space does not permit. | Write "Fetrum Receipt Requested" on the mailpiece below the article number. | The Return Receipt will show to whom the article was delivered and the date | Article Addressed to: | 4a Article Number

ed on the reverse side?

618 186 ٩

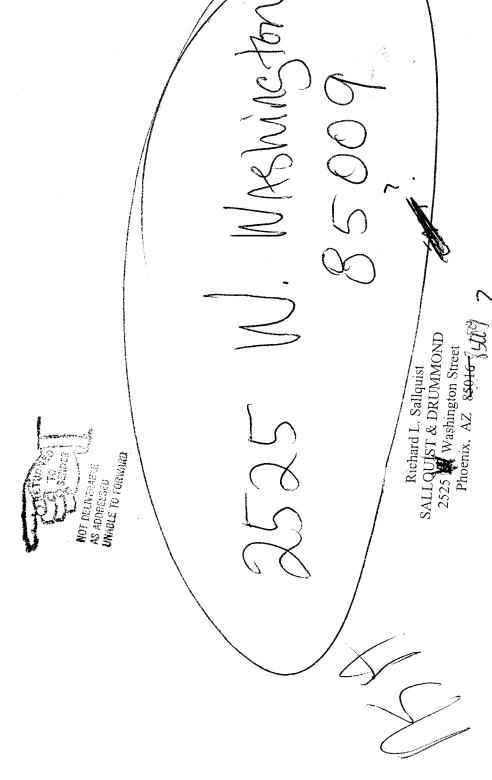


母布拉伯香學都有奇特和有女

U.S. POSTAGE







ARIZONA CORPORATION COMMISSION 1200 W. Washington - Hig. Div./Docket Phoenix, Arizona 85007-2996